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Substitute for form 1449/PTO			
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>			
Sheet 1		of 2	
Application Number		16/828,365	
Filing Date		2004	
First Named Inventor		Stanley J. Flashinski	
Art Unit			
Examiner Name			
Attorney Docket Number		1-3997	

[illegible][illegible]

Examiner Signature	<i>S. S.:</i>	Date Considered	3/4/04
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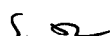
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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known	
		Application Number	10 / 828,362
		Filing Date	April 20, 2004
		First Named Inventor	Flashinski
		Art Unit	
		Examiner Name	
Sheet 2	of 2	Attorney Docket Number	J-3997

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
JS		FLASHINSKI, STANLEY J., Baygon Chip description and picture.	

Examiner Signature		Date Considered	3/4/05
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